

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines

12FE4M5

**MAJORITY COMMITTEE PAC--MC PAC**

ADDRESS (number and street)

P.O. BOX 10134



(Check if address is changed)

BAKERSFIELD

CA

93389

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

cbrunni@bak.rr.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

6615882991

2. DATE

M M  
0 6D D  
0 9Y Y Y Y  
2 0 0 8

3. FEC IDENTIFICATION NUMBER

C C00428052

4. IS THIS STATEMENT
- ☐
- NEW (N) OR
- ☒
- AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer **CM BRUNNI**Signature of Treasurer Electronically Filed by **CM BRUNNI**

Date

M M  
0 6D D  
0 9Y Y Y Y  
2 0 0 8

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office  
Use  
Only**For further information contact:**  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 12/2007)